

# Checklist: Dialysis Station Routine Disinfection

This list can be used if there is no visible soil on surfaces at the dialysis station. If visible blood or other soil is present, surfaces must be cleaned prior to disinfection. The proper steps for cleaning and disinfecting surfaces that have visible soil on them are not described herein. Additional or different steps might be warranted in an outbreak situation. Consider gathering necessary supplies<sup>1</sup> prior to Part A.

## Part A: Before Beginning Routine Disinfection of the Dialysis Station

- Disconnect and takedown used blood tubing and dialyzer from the dialysis machine.
- Discard tubing and dialyzers in a leak-proof container<sup>2</sup>.
- Check that there is no visible soil or blood on surfaces.
- Ensure that the priming bucket has been emptied<sup>3</sup>.
- Ensure that the patient has left the dialysis station<sup>4</sup>.
- Discard all single-use supplies. Move any reusable supplies to an area where they will be cleaned and disinfected before being stored or returned to a dialysis station<sup>5</sup>.
- Remove gloves and perform hand hygiene.

## PART B: Routine Disinfection of the Dialysis Station – AFTER patient has left station

- Wear clean gloves.
- Apply disinfectant<sup>6</sup> to all surfaces<sup>7</sup> in the dialysis station using a wiping motion (with friction).
- Ensure surfaces are visibly wet with disinfectant. Allow surfaces to air-dry<sup>8</sup>.
- Disinfect all surfaces of the emptied priming bucket<sup>3</sup>. Allow the bucket to air-dry before reconnection or reuse.
- Keep used or potentially contaminated items away from the disinfected surfaces.
- Remove gloves and perform hand hygiene.

**Do not bring patient or clean supplies to station until these steps have been completed.**



*Making dialysis safer for patients*



**Centers for Disease  
Control and Prevention**  
National Center for Emerging and  
Zoonotic Infectious Diseases

## Important Notes:

- <sup>1</sup> Necessary supplies may include, but are not limited to: leak-proof disposal containers, gloves and other appropriate personal protective equipment (PPE), properly diluted Environmental Protection Agency (EPA)-registered hospital disinfectant, and wipes/clothes.
- <sup>2</sup> If used dialyzers and blood tubing are transported out of the station before being discarded, they should be transported in a manner that prevents any leakage.
- <sup>3</sup> Perform this step if machine is equipped with a bucket for prime waste. If waste-handling option (WHO) ports are used, separate steps for disinfection are required and are not described here (follow manufacturer's instructions).
- <sup>4</sup> Patients should not be removed from the station until they have completed treatment and are clinically stable. If a patient cannot be moved safely, routine disinfection of the dialysis station should be delayed until the station can be vacated in a safe manner. If patients are moved to a separate seating area prior to removing cannulation needles or while trying to achieve hemostasis, the chairs and armrests in those areas must be disinfected in between patients.
- <sup>5</sup> Disposal/removal of used supplies may occur before and/or after the patient has departed the station.
- <sup>6</sup> Follow the manufacturer's label instructions for proper dilution, preparation, and use of the disinfectant.
- <sup>7</sup> Surfaces to disinfect include but are not necessarily limited to: all surfaces in contact with the patient (e.g., dialysis chair, tray tables, blood pressure cuffs) and frequently contacted by healthcare personnel (e.g., control panel; top, front and sides of dialysis machine; touchscreens; countertops; computer keyboards).
- <sup>8</sup> Air-drying is recommended to allow for sufficient contact time with the disinfecting agent.